

Name: _____ SS #: _____
Last First MI

E-Mail: _____ Work Phone: _____

Record Of Completion

Date Taken

- 1) _____
- 2) _____
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- 10) _____

Citizen's Aide/Ombudsman (RM 010)
Contested Cases (RM 008)
Electronic Code Research (RM 005)
Ethics for the Rule Maker (RM 009)
Executive Orders Relating to Rulemaking (RM 006)
Introduction to Administrative Law (RM 001)
Judicial Rule Review (RM 007)

Legislative Process in Iowa State Government (GI 144)
Open Meetings/Public Records (RM 011)
Overview of State Government Finances (MC 311)
Rule Writing Style (RM 003)
Rulemaking Process (RM 004)
Statutory Construction and Legal Drafting (RM 002)

Employee Signature Date Department Director Signature Date

Supervisor Signature *Date* *Training Liaison Signature (State Employee Only)* *Date*

State Employees: Your agency's Training Liaison
Non-State Employees: PDS Training, DAS-HRE, Fax: (515) 242-6450, Phone: (515) 281-5456

Confirmed:	Courses Valid Since:	Completion Date By:
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Certificate Sent: